

# out

Contrary to popular belief, DIY home birth mostly goes well as the birthing woman is more relaxed in her own kitchen and toilet, birth around a log fire. Home birth is mostly very nice. I should know, as birth at home was part of my general practice for over 10 years.

Now and again something happened which required equipment and a cool professional head, heroics rarely. In one case I heard of recently a normal living baby was born 'in a caul' and nobody present knew to break the sac. Sadly the baby drowned in his own liquor. If only a midwife had been present.

Incidents such as this will

increase unless home birth midwives are taken on board and become part of the health system with all the necessary support.

The platitude 'we live in a changing world' really has a different meaning now than a year ago. For workers the world over, it's about simplifying to survive and reducing carbon footprint. Every hospital doctor I speak to

is appalled at the magnitude of medical waste. Low technology medicine and strategies for real prevention of harm deserve a better place in the sun.

Changes in maternity care is just one example of a wider shift as to *who* will provide healthcare. I was reliably informed that the Garling Report on health from the NSW Government likened the doctor/

nurse relationship to the 'Great Schism' when hundreds of years ago the orthodox church in the East broke away from the Pope in Rome. Medicare provider numbers may soon be awarded to nurses, say in remote locations where there is no doctor. Is this unreasonable?

Once this starts though, where will it end for doctors and their jobs?

